This service log must align with daily objectives/goals and lesson plans, progress monitoring data, and students’ IEP services.



**DENVER PUBLIC SCHOOLS**

Division of Student Services

**Special Educator’s Service Log**

|  |  |  |
| --- | --- | --- |
| **Teacher’s Name:** Click here to enter text. | **School:** Click here to enter text. | **Month/Year:** Click here to enter text. |

The service provider logs are to be completed daily and kept in teacher’s data notebook and/or lesson plan book until the end of each month. File and archive with your lesson plans for auditing purposes.

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|  | **DATE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **STUDENT** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** | **16** | **17** | **18** | **19** | **20** | **21** | **22** | **23** | **24** | **25** | **26** | **27** | **28** | **29** | **30** | **31** |
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**DIRECT SERVICE CODES:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **X** – IEP Service Provided | **A** – Student Absent | **H** – Holiday/Vacation | **PD –** Planning Day | **FT** – Field Trip | **SE –** Special Event | **TA –** Teacher Absent | **O –** Other (Explain) |

**INDICATE INDIRECT SERVICE (CONSULT) BY:** I,minutes (i.e., I,15)